Report to Albertans

Rationale of Minister's Approval of Oral Surgery Contracts under the *Health Care Protection Act*

November 1, 2000

Alberta
HEALTH AND WELLNESS

MESSAGE FROM THE MINISTER

I am pleased to present my rationale for approving these contracts for oral surgical services under the *Health Care Protection Act.*

Assessment and approval of these contracts followed the same process as the contracts approved on September 29, 2000: a department Proposal Assessment Team review, an independent third party assessment, and my own examination. This report summarizes my findings.

Albertans can be confident the contracts meet all legislated and regulatory requirements, and protect public delivery of insured health services.

Gary G. Mar, Q.C.
Minister of Health and Wellness

EXECUTIVE SUMMARY

Assessment The Capital and Calgary health authorities submitted proposals for 16 oral surgery contracts. Alberta Health and Wellness reviewed each proposal against strict assessment criteria, and a third party provided an independent evaluation. I conducted my own review.

Compliance I am satisfied these contracts meet the requirements of the *Health Care Protection Act*, support the principles of the *Canada Health Act*, and identify a benefit to the public. Contracted services will be provided by dentists and anesthetists with proven qualifications and experience, and provisions are in place to monitor their compliance with applicable professional legislation. Each facility is accredited by the College of Physicians and Surgeons of Alberta, and also must operate to the standards of the Alberta Dental Association.

Conflict of Interest Dentists providing contracted services must comply with the Alberta Dental Association's rules concerning conflicts of interest. Facilities must comply with health authority bylaws modeled on those that apply to M.L.A.s, provincial employees and contractors. I reviewed facility ownership information and conflict of interest declarations, and am satisfied no conflict of interest exists.

Patient Protection The proposals show patients are fully protected during regular pre- and post-operative care, and in emergencies. Requirements for patient complaint resolution processes are in place. Reasonable contingency plans are in place so the health authority can sustain public access to services if the contractor is unable to.

Public Benefit All contracts show a public benefit, as detailed in the body of this report.

PUBLIC BENEFIT

Insured oral surgery procedures affect the facial structure. Examples are some kinds of temporomandibular joint syndrome (TMJ) and removal of oral cysts. These services do not include dental procedures on teeth.

In both health authorities, contracted oral surgery services must be performed to the same standard as is available in hospitals. Providers must adhere to standards that, in many cases, exceed accreditation standards of the College of Physicians and Surgeons of Alberta. All but two contracts, one in each health authority, are with previous providers for existing contracted services.

The proposal process found some contractors had mistakenly billed patients or their insurers for insured services, such as referrals. Under the new contracts, no patient can be billed for an insured service.

Calgary Regional Health Authority

8 contracts

The Calgary Regional Health Authority has had contracts with oral surgical facilities since 1996. These facilities provide excellent quality services and enhanced patient and surgeon choice, and have helped the health authority avoid substantial capital investment. However, only 250 procedures are contracted. Most procedures, 1150 out of 1400, remain in public facilities.

Calgary notes new technology and procedures allow some procedures, which used to require hospital stays, to be performed safely on an outpatient basis. The contracts free needed hospital space for other, hospital-based procedures.

Calgary also notes the contracts offer a saving to the health authority. Repatriating these procedures back into the public hospital system will put pressure on public facilities, and will increase wait times for other procedures.

Capital Health Authority

8 contracts

The Capital Health Authority also has had oral surgery contracts since 1996. One contract is not due for renewal until 2002, but the operator is required to work under terms and conditions similar to these newly approved contracts.

Public facilities will continue to perform 709 procedures annually, over half of which are day surgeries. The volume of contracted services is expected to increase from 820 to 1415 procedures, mostly from covering procedures formerly billed to patients. Repatriating this volume of procedures into public facilities would create pressures that may affect wait times for other procedures. The contracted services are being offered at a cost similar to providing the procedures at the Royal Alexandra Hospital.

In addition, wait list information that used to reside in the facilities now must be provided to the health authority so it can be tracked.

SUMMARY OF APPROVED CONTRACTS

		Annual Value	Status
Calgary Regional Health Authority	Brian Whitestone*		Renewal
	Donald I. Wakeham*		Renewal
	Douglas J. Vincelli*		Renewal
	Francis Skulsky*		Renewal
	Hedd-Wyn Lloyd Williams*		New
	John W. Conley*		Renewal
	Brian Abrams*		Renewal
	Terence A. Summers		Renewal
	Total	$ 80,250	0.006 % of $1.4 B current budget

The Calgary Regional Health Authority has chosen to fund its contracts in a block. Volume limits are not assigned to individual contracts.

		Annual Value	Status
Capital Health Authority	Walter Dobrovolsky*	$ 96,000	Renewal
	Kevin E. Lung*	$ 86,400	Renewal
	E. Christopher Robinson*	$ 40,000	Renewal
	Terence K. Vankka*	$ 24,000	New
	Darrell Andrew Paul*	$ 96,000	Renewal
	Thomas R. Stevenson*	$ 48,000	Renewal
	E. Wayne Tunis*	$ 54,400	Renewal
	Randall W. Kreutz*	$ 40,000	Renewal
	Total	$484,800	0.37 % of $1.3 B current budget

* denotes Professional Corporation